UNITED STATES DISTRICT COURT

for the

Northern District of Texas

Outsourcing Facilities Association; North American Custom Laboratories, LLC d/b/a FarmaKeio Custom Compounding Plaintiff(s) V. UNITED STATES FOOD AND DRUG ADMINISTRATION; and DR. ROBERT M. CALIFF, in his official capacity as Commissioner of Food and Drugs))))) Civil Action No. 4:24-cv-00953-P))				
Defendant(s))				
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address) United States Food and Drug Administration 10903 New Hampshire Ave. Silver Spring, Maryland 20903					
A lawsuit has been filed against you.					
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:					
Tyler G. Doyle Baker & Hostetler LLP 811 Main Street, Suite 1 st Houston, Texas 77002	100				
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.					
	CLERK OF COURT				
Date:					
	Signature of Clerk or Deputy Clerk				

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Civil Action No. 4:24-cv-00953-P

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nan	ne of individual and title, if any)			
was re	ceived by me on (date)	· · ·			
	☐ I personally served	the summons on the individual	at (place)		
			on (date)		
	☐ I left the summons at the individual's residence or usual place of abode with (name)				
	, a person of suitable age and discretion who resides there,				
	on (date)	, and mailed a copy to the individual's last known address; or			
	☐ I served the summons on (name of individual) , who				
	designated by law to accept service of process on behalf of (name of organization)				
			on (date)	; or	
	☐ I returned the sumn	nons unexecuted because		; or	
	☐ Other (specify):				
	My fees are \$	for travel and \$	for services, for a total of \$	0.00	
	I declare under penalty of perjury that this information is true.				
Date:					
			Server's signature		
			Printed name and title		
			Server's address		

Additional information regarding attempted service, etc: